

(1) PLACE OF BIRTH

County of B. H.
 Township of St. Helena
 or
 Inc. Town of _____
 or
 City of _____

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

Registration District No. 604

File No.—For State Registrar Only

10103

Registered No. 56
(For use of Local Registrar)St. _____ Ward)
(No. _____)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lucia Brown

If child is not yet named, make supplemental report as directed

1. BOY OR GIRL Girl 2. Twin or Triplet? No 3. Number in order of birth 1 4. Are Parents Married? Yes 5. DATE OF BIRTH April 17, 22
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

6. FULL NAME I know
 7. PRESENT POSTOFFICE OF FATHER X
 10. COLOR OR RACE X 11. AGE AT LAST BIRTHDAY X (Years)
 12. BIRTHPLACE X
 13. OCCUPATION X
 14. Number of children born to mother, including present birth 2

MOTHER.

14. NAME BEFORE MARRIAGE Mary Brown
 15. PRESENT POSTOFFICE OF MOTHER Frogmore SC
 16. COLOR OR RACE Negro 17. AGE AT LAST BIRTHDAY 17 (Years)
 18. BIRTHPLACE I. S. G.
 19. OCCUPATION Common Laborer
 20. Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 M. P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Vernice Lawrence
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness Green Brown
 (Signature of Witness necessary only when question 23 is signed by mark)

19 _____
Registrar

(27) Filed 4/29/22 (28) J. O. Shannon
 Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.